

PS-1 Application

Applicant Name: _____



**Department of Public Safety Standards and Training, Private Security
& Investigator Program** 4190 Aumsville Hwy SE, Salem, OR 97317 Ph #. (503) 378-8531
FAX (503) 373-4600

PRIVATE SECURITY CERTIFICATIONS/LICENSES

1. **UNARMED PRIVATE SECURITY PROFESSIONAL** - Must be at least 18 years of age
Criminal History Fingerprint Fee - \$50.00, Certification (2 yr.) fee - \$50.00 = **\$100.00**
2. **ARMED/UNARMED PRIVATE SECURITY PROFESSIONAL** - Must be at least 21 years of age
Criminal History Fingerprint Fee - \$50.00, Certification (2 yr.) fee - \$50.00 = **\$100.00**
3. **ALARM MONITOR PROFESSIONAL** – Primary responsibility is monitoring alarms.
Criminal History Fingerprint Fee - \$50.00, Certification (2 yr.) fee - \$50.00 = **\$100.00**
4. **SUPERVISORY MANAGER** – Has a primary responsibility of supervising certified officers.
Criminal History Fingerprint Fee - \$50.00, Certification (2 yr.) fee - \$50.00 = **\$100.00**
5. **CERTIFIED PRIVATE SECURITY INSTRUCTORS** - **
Criminal History Fingerprint Fee - \$50.00, Certification (2 yr.) fee - \$80.00 = **\$130.00**
*** SPECIFIC TRAINING IS REQUIRED FOR INSTRUCTOR**
6. **EXECUTIVE MANAGER** –
Criminal History Fingerprint Fee - \$50.00, Certification (2 yr.) fee- \$250.00 = **\$300.00**

****Additional Requirements for Private Security Instructors**

Private Security Instructors

All private security instructors please submit a resume with your application materials. Your resume must clearly show your education, work experience, and qualifications.

If applying for a private security firearms instructor certification you must hold and provide proof of current certification from the NRA (Law Enforcement Instructor Development School), FBI (firearms instructor), FLETC (firearms instructor), Washington State Criminal Justice Fire Arms Instructor Course or DPSST (certified firearms instructor course).

INVESTIGATORS LICENSES

- | | |
|---|---|
| 7. <input type="checkbox"/> PRIVATE INVESTIGATOR** | Application fee \$79*, License Fee \$550 |
| 8. <input type="checkbox"/> PROVISIONAL INVESTIGATOR | Application fee \$79*, License Fee \$550 |
| 9. <input type="checkbox"/> TEMPORARY INVESTIGATOR | License fee \$125 |
| 10. <input type="checkbox"/> INACTIVE INVESTIGATOR | Application fee \$50 |

*** Original application fee covers the criminal background check and exam.**

Applicants for licensure as a private investigator must submit two passport sized photo's for their photo identification card. The pictures submitted should be no larger than 2" x 3".

(Passport photos can be obtained at local retailers.)

Your head
must fit in
this space.
Please attach
photo's in an
envelope
here.

****Additional Requirements for Private Investigators**

Private Investigators

If applying for an investigators license you must clearly show you have 1500 hours of education and/or experience. It is necessary to submit a resume with your application materials. Your resume must clearly show your education, work experience, and qualifications. Original bond or letter of credit must be provided and must list the application as principal or certificate of insurance must be submitted. In addition to the certificate, if the investigator is covered under the employer's insurance policy, your employer must submit a letter verifying that you are covered.

Information and Special Instructions

Tips For Completing Your Application – The Application must be completely filled out, remember to read each section carefully. Do not leave blank spaces. If a question or statement does not pertain to you, fill in the blank space provided with an N/A for “not applicable”. If you have questions about the certification process please visit our website www.dpsst.state.or.us for general information or call us at 503 378-8531.

- **Did you include your fee, resume, bond info?** All required materials and fees must be included for your application to be processed. Requirements vary between disciplines and depend on the license or certificate sought. Contact DPSST if you have any questions.
- **Personal Information:** You must provide us with a current home and business address. If we are unable to contact you by mail, your application for certification may be terminated.
- When filling in your residence and employment history, be sure to cover the full 10 year period back from today’s date, even if you were living with your parents or unemployed.
- **Personal References:** Your three personal references must include phone and addresses.
- **Criminal History Declarations:** You must accurately and completely disclose your entire conviction history in section 6. This includes all felonies, and/or misdemeanor crimes you have been convicted of. If you fail to disclose a conviction, your application may be **disqualified and you may be subject to Civil Penalty**. Be aware that some traffic offenses may be classified as misdemeanors/felonies, for example, “Reckless Driving”, “Driving Under the Influence of Intoxicants”, and “Driving While Suspended”. If you are not sure, you should list the offense. Be certain to list date and location for each conviction. If you have history that you believe should have been “expunged” or removed from your record, but you do not **know** (proof in hand) that it was expunged or removed, you should verify your belief prior to applying. A crime is not removed from your record until you go through the formal process to have it removed. Believing a conviction was removed, or forgetting a conviction existed, is not a valid defense and your application for certification or licensure could be denied, based on failure to disclose the crime. If you have any questions or are unsure about your criminal past, you should research the issues for yourself prior to applying.
- **Signing your application:** You must sign or initial all applicable areas of the application. The final signature line must be signed and dated in front of a notary.

Application Process Information

Deficiency letters – Notify you of a deficiency in the application or other required material. If you receive a deficiency letter, respond immediately. If you do not correct the deficiency in the timeline allowed, your application will be administratively terminated pursuant to Oregon law, and you must then reapply to receive your certification/license.

Termination letters – If you receive a letter notifying you that your application has been terminated, you cannot continue to provide services, to do so would be unlawful.

Fingerprint processing – To process your criminal background check you must submit two fingerprint cards: printed, filled out, signed and sealed in an evidence bag. DPSST does not control rejected prints. The best way to avoid rejections is to have your prints rolled by a skilled technician. Many applicants have their local law enforcement agency roll or scan their prints.

Temporary work permit – If you are currently employed as a security provider, or investigator, and your application is in process, but you are not yet certified, your licensed employer can issue you a temporary certification/license. This certification/license will allow you to perform services for up to 120 days while your application processes. Licenses from Out-of-State, who are seeking temporary licensure in Oregon, must provide a separate application available through DPSST. **There is no temporary work provision for applicants for armed certification.**

1. Complete the application fully. Do not leave any sections blank. If the question or statement does not apply to you please put an "N/A" in the space for not applicable. Incomplete applications could cause delays in processing. Sign your application in front of a Notary Public.
2. Pay required fees with cashier's check, business check or money order made payable to DPSST. Personal checks and cash are not accepted. All fees are **non-refundable** and must accompany the application.
3. Mail application and any other required materials along with the fees to the address listed above.
4. If adding a classification, complete Sec. 2, 1-14 only, Sec. 6; have notarized. If upgrading from unarmed to armed officer also attach a PS-23.

SECTION 2 – PERSONAL INFORMATION

1. Name _____ 2. Alias Name(s) _____
Last First Middle
3. Mailing Address _____ City _____ State ____ Zip _____
4. E Mail Address _____ 5. Date of Birth _____
6. Home phone _____ 7. Work phone _____ 8. SSN * _____
9. Gender __ M __ F 10. Height _____ 11. Weight _____ U.S. citizen Yes No
12. Race (Circle one) A (Asian) B (African-American) H (Hispanic) I (Native American) W (Caucasian)
13. Natural eye color (Circle one) BRO BLK GRY BLU HAZ GRN Other _____
14. Natural hair color (Circle one) BRO BLK GRY BLN RED WHI Other _____
15. Driver's License Number and State _____ / ____ 16. Expires _____
17. City/State of birth _____ 18. Country of birth (if not U.S.) _____
19. Have you had a driver's license in another state? No ____ Yes ____ (State) _____ (Year/s)

SECTION 3 - CHARACTER REFERENCES - Fully list three names, addresses, phone numbers of three people you have known for at least 5 years – Your references cannot be related by blood or marriage.

1. Name _____ Telephone _____
Street Address _____ City _____ State ____ Zip _____
2. Name _____ Telephone _____
Street Address _____ City _____ State ____ Zip _____
3. Name _____ Telephone _____
Street Address _____ City _____ State ____ Zip _____

* You are required to provide your Social Security Number (SSN) to DPSST. The authority for this requirement is ORS 25.785 and ORS 305.385, 42 USC 405(c)(2)(C)(i), 42 USC 666(a)(13) and OAR 259-060-0120(10). Failure to provide your SSN will be basis to refuse issuance of a license or certificate. The record of your SSN will be used to obtain criminal background information, and for child support enforcement and tax administration (including identification) purposes only. Your SSN will remain on file with DPSST.

SECTION 6 – AFFIRMATION OF CRIMINAL HISTORY

Prior to filling out this section, read the special instructions section of this application. PLEASE CALL IF YOU HAVE ANY QUESTIONS REGARDING WHETHER OR NOT YOUR CRIMINAL HISTORY OR CONVICTION(S) WOULD DISQUALIFY YOU FROM CERTIFICATION/LICENSURE. Your application fee cannot be refunded if you are denied. Equivalent convictions from places other than Oregon will carry the same period of disqualification. You must disclose your entire criminal history below. Attach additional pages if necessary.

Carefully read statements 1 through 6 below. Choose which statements apply to you by signing your name in the blank space provided. If a statement does not apply to you, fill in the blank space with an N/A for “not applicable”. If statements 2, 4 or 6 apply to you, also provide the additional information requested, add additional sheets if necessary.

- 1) I, (name) _____, swear and/or affirm that I have never in my lifetime been convicted of any crime in this state or any other jurisdiction.

- 2) I, (name) _____, swear and/or affirm that throughout my lifetime I have been convicted of the below listed crime(s) and no others. (If available attach copies of police reports and court documents. A crime is any offense at or above a misdemeanor (see instructions).

Charge _____ Court _____ Date _____ State/Country _____

Charge _____ Court _____ Date _____ State/Country _____

Charge _____ Court _____ Date _____ State/Country _____

- 3) I, (name) _____, swear and/or affirm I am not required to register as a sex offender in this state or any other.

- 4) I, (name) _____, am required to register as a sex offender in the State of _____, for the crime of _____.

FAILURE TO REPORT ALL CRIMINAL CONVICTIONS IS ITSELF A CRIME. IF YOUR CRIMINAL BACKGROUND CHECK SHOWS CONVICTIONS THAT WERE NOT DISCLOSED, YOUR APPLICATION MAY BE TERMINATED BY DPSST, AND YOU MAY BE SUBJECT TO CIVIL PENALTY.

If applying for armed security officer or armed instructor, choose from and complete the following statements:

- 5) I, (name) _____, swear and/or affirm I have never been committed to the Mental Health and Developmental Disability Services Division under ORS 426.130, or the equivalent, in this or any other state.

- 6) I, (name) _____, have had my right to purchase or possess a firearm revoked/prohibited. Date _____ State _____. Reason _____

**CERTIFICATION OF ACCURACY, NOTICE TO APPLICANT AND
AUTHORITY TO RELEASE INFORMATION**

PLEASE READ INITIAL AND SIGN EACH PARAGRAPH BELOW. (Final signature must be witnessed by a Notary Public.)

Oregon Revised Statute 181.991 & 703.993 states: A person commits a Class A Misdemeanor if the person knowingly falsifies information pertinent to an application for a license or certificate.

I hereby authorize any person or organization to provide any information about me to the Department of Public Safety Standards and Training, including criminal history information or any other information about me related to my character or fitness for licensing or certification under ORS 181.870-181.991 or ORS 703.401-703.490. I further authorize DPSST, or an authorized representative of the Board, to release to any law enforcement agency or employer or prospective employer any information held by DPSST concerning my application. I understand that the Board may also be required to release information from my file to other persons, pursuant to Oregon public records law. **Initial** _____

I understand and agree that DPSST is required to deny, revoke or suspend certification/licensure if I have been convicted of a disqualifying crime. I understand that falsifying my application or a finding, by the Department, that information provided on the forms submitted in application, or that is contrary to my sworn oath are grounds for denial, revocation or suspension of my certification/licensure, and may subject me to civil penalty and/or prosecution. This includes if my criminal history check shows information contrary to that disclosed, or subsequent criminal, unethical or immoral activity. **Initial** _____

I release the Department of Public Safety Standards and Training and its agents from any and all liability and responsibility, damages, and claims of any kind whatsoever arising from actions taken in fulfilling the departments' statutory obligations. **Initial** _____

I hereby declare under oath and under penalty of perjury that all information contained in this application is true and correct. I have read each of the paragraphs written above as indicated by my initials. I understand and agree to the terms and conditions as described.

Printed Name of Applicant

Signature of Applicant

STATE OF OREGON, County of _____) ss.

On this _____ day of _____, 200____, _____

personally appeared before me and signed the Certification of Accuracy in my presence, and I verified the applicant's identity by viewing photo identification.

Signature of Notary Public